



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent application of:
Chandrashekhar KOCHERLAKOTA et al.

Application No.: 10/817,306

Filed: April 2, 2004

For: NOVEL CAPSULE FORMULATIONS
OF ETOPOSIDE FOR ORAL USE

Date: May 10, 2005
Atty. Docket No.: BRDF 3.0-001
(Former Docket No. U 014533-9)

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

TRANSMITTAL OF POWER OF ATTORNEY

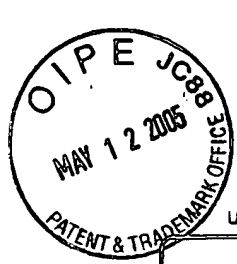
The owners of this application wish to formally appoint attorneys for further proceedings, and therefore are enclosing Forms PTO/SB/80 and PTO/SB/96.

Please change the correspondence address to that of **Customer No. 45776**, and enter the new attorneys' **Docket No. BRDF 3.0-001**.

Respectfully submitted,

Robert A. Franks
Attorney for Applicants
Reg. No. 28,605

Dr. Reddy's Laboratories, Inc.
200 Somerset Corporate Blvd.
Seventh Floor
Bridgewater, NJ 08807-2862
Telephone 908-203-6504
Facsimile 908-203-6515



POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with the Customer Number: 45776

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

☒ The address associated with Customer Number: 45776

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone			Fax

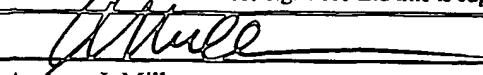
Assignee Name and Address:

Dr Reddy's Laboratories Limited
7-1-27 Ameerpet
Hyderabad 500 016, Andhra Pradesh, India

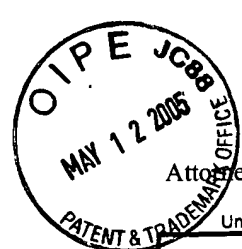
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	December 21, 2004
Name	Andrew J. Miller	Telephone	908-203-4949
Title	Board Designee		

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.**



Attorney Docket No. BRDF 3.0-001

PTO/SB/96 (09-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Chandrashekhara KOCHERLAKOTA et al.

Application No./Patent No.: 10/817,306 Filed/Issue Date: April 2, 2004

Entitled: NOVEL CAPSULE FORMULATIONS OF ETOPOSIDE FOR ORAL USE

Dr. Reddy's Laboratories Limited, a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or
2. ☒ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is 50 %

in the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: the four inventors To: Dr. Reddy's Laboratories Limited
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Robert A. Franks

Signature

Robert A. Franks (Reg. No. 28,605)

Printed or Typed Name

Attorney for Dr. Reddy's Laboratories Limited

Title

May 10, 2005

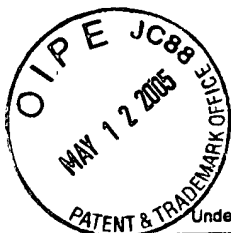
Date

908-203-6504

Telephone Number

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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:



Practitioners associated with the Customer Number:

45776

OR



Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

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The address associated with Customer Number:

45776

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone			Fax

Assignee Name and Address:

Dr Reddy's Laboratories, Inc.
200 Somerset Corporate Boulevard, Seventh Floor
Bridgewater, New Jersey 08807-2862

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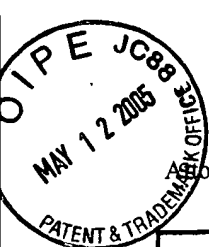
SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	December 21, 2004
Name	Andrew J. Miller	Telephone	908-203-4949
Title	Executive Vice President and General Counsel		

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Attorney Docket No. BRDF 3.0-001

PTO/SB/96 (09-04)
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Application No./Patent No.: 10/817,306 Filed/Issue Date: April 2, 2004

Entitled: NOVEL CAPSULE FORMULATIONS OF ETOPOSIDE FOR ORAL USE

Dr. Reddy's Laboratories, Inc., a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or
2. ☒ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is 50 %

in the patent application/patent identified above by virtue of either:

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OR

B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: the four inventors To: Dr. Reddy's Laboratories, Inc.
The document was recorded in the United States Patent and Trademark Office at
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2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Robert A. Franks
Signature

Robert A. Franks (Reg. No. 28,605)

Printed or Typed Name

Attorney for Dr. Reddy's Laboratories, Inc.

Title

May 10, 2005

Date

908-203-6504

Telephone Number

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



For: ☒ U.S. and/or ☒ Foreign Rights
 For: ☒ U.S. Application or
 ☐ U.S. Provisional Application
 For: ☐ U.S. Patent
 For: ☐ PCT Application
 By: Multiple inventors

ASSIGNMENT OF INVENTION (MULTIPLE INVENTORS)

In consideration of the payment by ASSIGNEE to ASSIGNOR of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

ASSIGNORS (Inventors):

Chandrashekhar Kocherlakota

(type or print name of inventors)

c/o Dr. Reddy's Laboratories Ltd.

7-1-27, Ameerpet, Hyderabad - 500 016, A.P.

Address INDIA Indian

Nationality

Sarveswara Rao Srirama Mandavilli

(type or print name of inventors)

c/o Dr. Reddy's Laboratories Ltd.

7-1-27, Ameerpet, Hyderabad - 500 016, A.P.

Address INDIA Indian

Nationality

Sankara Rao Basava Kolli

(type or print name of inventors)

c/o Dr. Reddy's Laboratories Ltd.

7-1-27, Ameerpet, Hyderabad - 500 016, A.P.

Address INDIA Indian

Nationality

Divakar Manepalli

(type or print name of inventors)

c/o Dr. Reddy's Laboratories Ltd.

7-1-27, Ameerpet, Hyderabad - 500 016, A.P.

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Nationality

 (type or print name of inventors)

c/o Dr. Reddy's Laboratories Ltd.

7-1-27, Ameerpet, Hyderabad - 500 016, A.P.

Address INDIA Indian

Nationality

Added page(s) for signature by subsequent inventors. Number of pages added



(if assignment is by person or entity to whom invention was previously assigned
and this was recorded in PTO, add the following)

Recorded on _____

Reel _____

Frame _____

Hereby sells, assigns and transfers to
ASSIGNEE

Dr. Reddy's Laboratories Ltd.
(type or print name of assignee)

7-1-27, Ameerpet, Hyderabad, A.P. India
Address

Indian
Nationality

&

Dr. Reddy's Laboratories Inc.
(type or print name of ASSIGNEE)

200 Somerset Corporate Blvd.
Address

United States of America
Nationality

7th Floor, Bridgewater, NJ 08807

And the successors, assigns and legal representatives of the ASSIGNEE

(complete one of the following)

- ☒ the entire right, title and interest
☐ an undivided _____ percent (_____%) right, title and interest for the United States and its territorial possessions

(check the following box, if foreign rights are also to be assigned)

☐ and in all foreign countries, including all rights to claim priority, in and to any and all improvements which are disclosed in the invention entitled:

NOVEL CAPSULE FORMULATIONS OF ETOPOSIDE FOR ORAL USE

Name of inventor(s) Chandrashekhara Kocherlakota, Sarveswara Rao Srirama Madavilli, Sankara Rao Basava Kolli, Divakar Manepalli

(check and complete (a), (b), (c), (d), (e), (f) or (g))

and which is found in (37 C.F.R. 3.21)

- (a) ☐ Not yet filed U.S. patent application executed on even date herewith
(b) ☐ Not yet filed U.S. patent application executed on _____
(c) ☐ Not yet filed U.S. provisional application naming the above inventor(s) for the above-entitled invention
☐ To comply with 37 C.F.R. 3.21 for recordal of this assignment, I, an ASSIGNOR signing below, hereby authorize and request my attorney to insert below the filing date and application number when they become known.
(d) ☐ U.S. patent application no. 10/817,306
filed on April 2, 2004
(e) ☐ International application no. PCT/_____/_____
(f) ☐ U.S. patent no. _____ issued _____
☐ A change of address to which correspondence is to be sent regarding patent maintenance fees is being sent separately.

(also check (g), if foreign application(s) is also being assigned)

(g) ☐ and any legal equivalent thereof in a foreign country, including the right to claim priority

and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, division, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof.

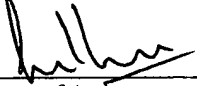
ASSIGNOR hereby covenants that no assignment, sale, Agreement or encumbrance has been or will be made or entered into which would conflict with this assignment.

ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

IN WITNESS WHEREOF, We have hereunto set hand and seal


WARNING: The date of signing must be the same as the date of execution of the application, if item (a) was checked above.

Chandrashekhar Kocherlakota
(type name of Assignor)

(X) 
Signature of Assignor

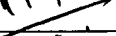
this (X) 2. Aug. 2004
date of signing

Sarveswara Rao Srirama Madavilli
(type name of Assignor)

(X) 
Signature of Assignor


this (X) 3 Aug. 2004
date of signing

Sankara Rao Basava Kolli
(type name of Assignor)

(X) 
Signature of Assignor

this (X) 3 Aug 2004
date of signing

Divakar Manepalli
(type name of Assignor)

(X) 
Signature of Assignor

this (X) 03- August - 2004
date of signing

(type name of Assignor)

(X) _____
Signature of Assignor

this (X) _____
date of signing

(if ASSIGNOR is legal entity, complete the following information)

Sankara Rao Basava Kolli

(type or print the name of the above person
authorized to sign on behalf of ASSIGNOR)

Executive Vice president (IPD)

Dr. Reddy's Laboratories Limited

7-1-27, Ameerpet, Hyderabad - 500 016

A.P., India

Title

NOTE : No witnessing, notarisation or legalization is necessary. If the assignment is notarised or legalized than it will only be prima facie evidence of execution. 35 USC 261. Use next page if notarisation is desired.